



Bib Data Sheet



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|                             |                                     |              |  |                                    |
|-----------------------------|-------------------------------------|--------------|--|------------------------------------|
| SERIAL NUMBER<br>09/516,787 | FILING DATE<br>03/01/2000<br>RULE - | CLASS<br>705 | GROUP ART UNIT<br><i>2768<br/>36L4</i> | ATTORNEY DOCKET NO.<br>10392/46801 |
|-----------------------------|-------------------------------------|--------------|--|------------------------------------|

## APPLICANTS

Steven M.H. Wallman, Great Falls, VA ;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A CIP OF 09/139,020 08/24/1998  
WHICH IS A CIP OF 09/038,158 03/11/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/25/2000

|                                 |   |                               |                     |                    |                         |
|---------------------------------|---|-------------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR COUNTRY<br>VA        | SHEETS DRAWING<br>3 | TOTAL CLAIMS<br>76 | INDEPENDENT CLAIMS<br>9 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                               |                     |                    |                         |
| Verified and Acknowledged       | Examiner's Signature<br><i>[Signature]</i>  | Initials<br><i>[Initials]</i> |                     |                    |                         |

## ADDRESS

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## TITLE

Method and apparatus for trading securities or other instruments

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|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1148 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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